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Collaborative Interprofessional Learning in Critical Care

Vikki Park - October 2012

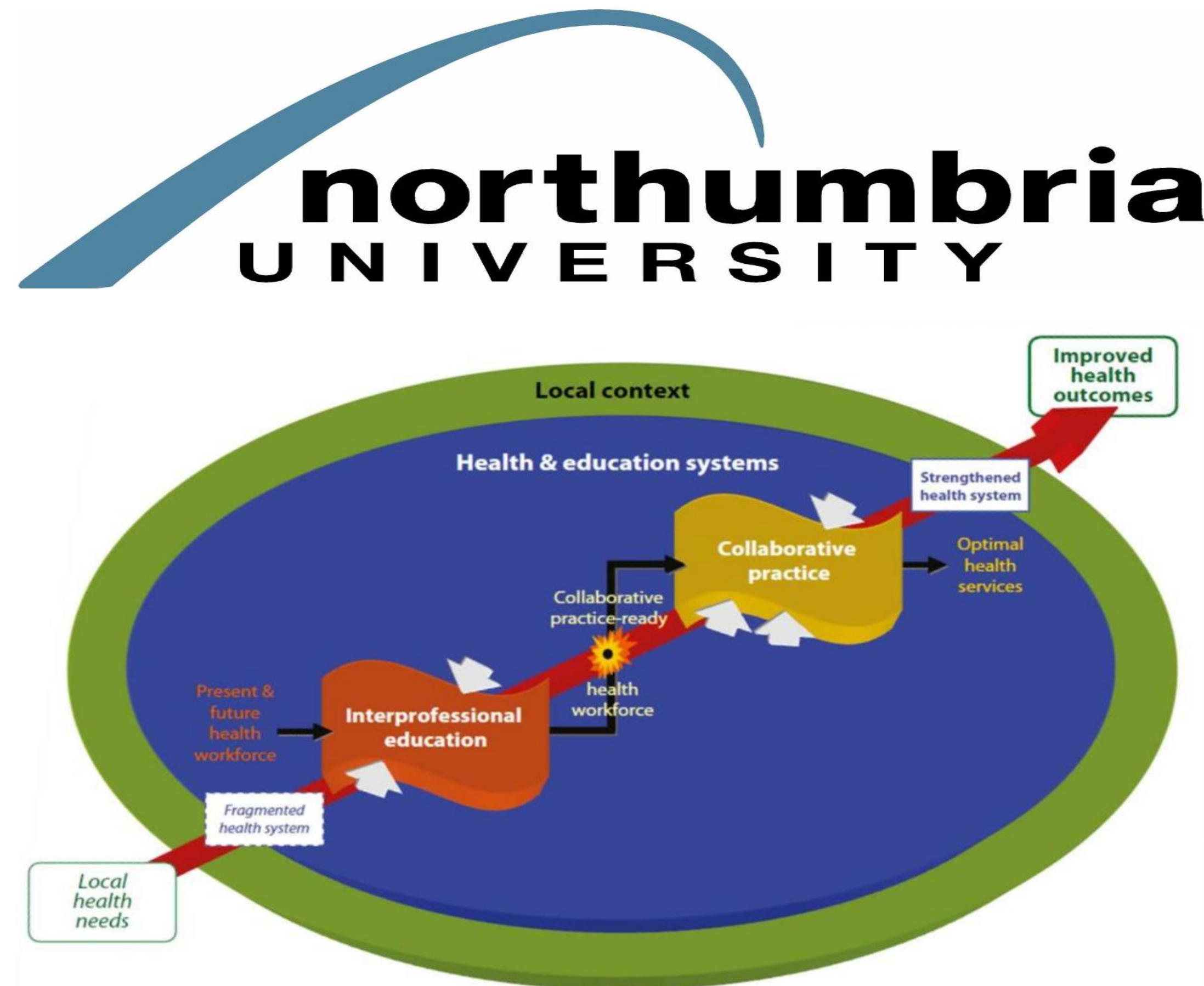


Figure 1: World Health Organisation 2010

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Research title

Collaborative interprofessional learning (CIPL) - an ethnographic study of the learning culture of NHS health staff within the adult critical care setting.

Background

The World Health Organisation (2010) state after almost half a century of research there is now sufficient evidence amassed to claim interprofessional education (IPE) and collaborative practice lead to improved health outcomes and optimal health services (Figure.1). As workers are being asked increasingly to work closer together (Marsick and Volpe 1999) the potential to learn from each other through interprofessional collaboration is therefore great. The adult critical care environment, due to its complexity (Scholes 2006) and involvement of numerous health professional teams (Rose 2011), offers a plethora of informal learning opportunities and has been described as an 'untapped learning resource' (Doucette et al. 2011).

Research Design

Question: To what extent do health professions learn collaboratively, interprofessionally and informally within the practice setting of adult critical care?

Objectives

- To observe the adult critical care environment and explore the interprofessional learning culture within the natural setting.
- To develop a rich description of the context of the critical care environment in order to illustrate the observed learning culture between interprofessional working groups.
- To understand critical care practitioners' perceptions of collaborative interprofessional learning (CIPL) within the adult critical care setting.
- To identify which factors are perceived to promote or inhibit effective CIPL.
- To explore, through observation and discussion, whether members of the critical care team value CIPL and whether they consider it an effective means of improving the knowledge base of the critical care interprofessional team.

Methodology

A naturalistic qualitative approach will be adopted using ethnography to observe the interprofessional interactions of NHS critical care staff which may present learning opportunities within their natural setting, and in their 'natural state' (Hammersley and Atkinson 1997).

"Ethnographic research aims to provide rich, holistic insights into people's views and actions as well as the nature of the location they inhabit through the collection of detailed observations and interviews (Reeves et al. 2008 p.512)."

Method

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|--------------------|---|--------------------|---|
| ● Stage I: | Non-participant observation | ● Stage II: | Interviews |
| ● Sample: | Three adult NHS critical care units
All professionals within the environment | ● Sample: | n=24 4 occupational groups: Nurse, Doctor, Health Care Assistant, Physiotherapist |
| ● Duration: | Observations spanning 2 months per unit | ● Duration: | Individual interviews ≤ 1 hour |

Coming to a Critical Care Unit near you?

It is proposed the research will take place within three units within the North of England and the proposal is currently undergoing stages of ethical approval.

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